

FORM LM-30
LABOR ORGANIZATION OFFICER AND
EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - **25238**

2. Fiscal Year Covered From

1 / 1 / 2005 Through: 12 / 31 / 2005

3. Name and address of person filing.

Name Patric M Verrone

P.O. Box, Bldg., Room No., if any 1428

Street

City Pacific Palisades

State California ZIP Code + 4 90272

4. Name, file number, and address of labor organization.

Name Writers Guild of America, west

Labor Organization File Number 000-078

P.O. Box, Building and Room Number, if any

Street 7000 West Third Street

City Los Angeles

State California ZIP Code + 4 90048

5. Position in labor organization. President

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name, if any).

Name Walt Disney Studios

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 500 South Buena Vista Street

City Burbank

State California ZIP Code + 4 91521

7.a. Nature of Interest, Transaction, or Income.

Filer, spouse, and three minor children received complimentary admission tickets to Disneyland theme park on July 24, 2005.

7.b. Amount.

\$300

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed



On

3/30/2006

Date

310-230-4455

Telephone Number

Name of Person Filing Patric Verrone	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>9. Business deals with:</p> <p>a. Labor Organization</p> <p>b. Trust</p> <p>c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>11.a. Nature of such dealing.</p>
	<p>11.b. Approximate dollar value of such dealing.</p>
	<p>12.a. Nature of interest held or income received.</p> <p>12.b. Amount.</p>

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name Twentieth Century Fox Licensing</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street 2121 Avenue of the Stars</p> <p>City Los Angeles</p> <p>State California ZIP Code + 4 90069</p>	<p>14.a. Nature of payment.</p> <p>Filer received licensed "Simpsons" products from this company (which is affiliated with a signatory employer) including promotional clothing and toys.</p>
<p>13.b. Is the Business an Employer <input checked="" type="checkbox"/> or Consultant <input type="checkbox"/></p>	<p>14.b. Amount of payment.</p> <p>\$250</p>

Name of Person Filing Patric Verrone

File Number U-

Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name if any).

Name Pixar Animation Studios

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1200 Park Avenue

City Emeryville

State California

ZIP Code + 4 94608

7.a. Nature of Interest, Transaction, or Income.

Filer's minor son holds 80 shares of Pixar stock in a custodial account under the Uniform Transfers to Minor Act administered by Marcheta Allen (filer's mother-in-law). Value of shares as of 12/31/2005 was \$4,218.

7.b. Amount.

\$4,218

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name if any).

Name Tom Lynch Company

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 421 S. Beverly Drive

City Beverly Hills

State California

ZIP Code + 4 90212

7.a. Nature of Interest, Transaction, or Income.

Filer was taken to numerous business lunches and received coffee maker and fruit basket as gifts during employment between July and December, 2005.

7.b. Amount.

\$500

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

7.a. Nature of Interest, Transaction, or Income.

7.b. Amount.